Rep. Joseph R. Pitts Opening Statement

Energy and Commerce Subcommittee on Health Hearing on "Telehealth to Digital Medicine: How 21st Century Technology Can Benefit Patients" May 1, 2014

The Subcommittee will come to order.

The Chair will recognize himself for an opening statement.

Telemedicine and digital medicine, in all of their forms, present a host of potential benefits to both patients and providers.

Virtual doctor visits are one way to help address provider shortages, particularly in rural areas, where patients may have to travel a great distance, at their own cost, to see a doctor in-person.

Telemedicine can allow in-home monitoring of chronically ill patients and facilitate patient education.

Provider-to-provider virtual consultations may also lead to greater efficiencies in the system by providing continuity of care and reducing duplicative testing and services.

The ability to Skype or use a video call can also reduce the inappropriate use of resources by patients. For example, a parent with a small child who is sick in the middle of the night could access a provider via web cam and potentially avoid an unnecessary trip to the emergency room.

For all its potential benefits, concerns about the appropriate way to support such technologies abound. If not done carefully, some fear the potential for good that many envision in this space can instead lead to waste, fraud, and abuse.

Therefore, the purpose of today's hearing is to explore the types of technologies that hold great promise, and hear ideas that allow the federal government to realize this potential to reduce costs, improve efficiencies, and ensure quality in our health care programs.

To that end, Ranking Member Pallone and I will be releasing a call for ideas following the hearing. We will be looking for specific policy and legislative ideas on how the federal government can support technology adoption in our health care programs for the

express and explicit purpose of reducing costs and increasing the overall quality and efficiency of the programs.

We are also looking for ways in which the federal government currently inhibits the use or adoption of such technologies by all players in the health care system – be they insurer, provider, or patient. The more specific and targeted the policy, the greater chance it will hold for Congressional support down the line.

I would like to welcome all of our witnesses to the Subcommittee today, especially Dr. Tom Beeman, President and CEO of Lancaster General Hospital, the largest hospital and one of the largest employers, in my congressional district.

Thank you, an	d I yield the rem	ainder of my time to	
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